

Fill in this information to identify your case:

Debtor 1 Carmen Reshun Smith
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____

Case number (If known) 24-55036

FILED
U.S. BANKRUPTCY COURT
NORTH DISTRICT
OF GEORGIA

2024 MAY 17 PM 3:18

VANIA S. ☐ Check if this is an amended filing
CLERK
BY: Cosha Taylor
DEPUTY CLERK

Official Form 103B

Application to Have the Chapter 7 Filing Fee Waived

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: Tell the Court About Your Family and Your Family's Income

1. What is the size of your family?

Your family includes you, your spouse, and any dependents listed on Schedule J: Your Expenses (Official Form 106J).

Check all that apply:

- ☒ You
☐ Your spouse
☒ Your dependents

How many dependents? 8

Total number of people 9

2. Fill in your family's average monthly income.

Include your spouse's income if your spouse is living with you, even if your spouse is not filing.

Do not include your spouse's income if you are separated and your spouse is not filing with you.

Add your income and your spouse's income. Include the value (if known) of any non-cash governmental assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.

If you have already filled out Schedule I: Your Income, see line 10 of that schedule.

Subtract any non-cash governmental assistance that you included above.

Your family's average monthly net income

That person's average monthly net income (take-home pay)

You..... \$ _____

Your spouse.... + \$ _____

Subtotal..... \$ _____

— \$ _____

Total..... \$ _____

3. Do you receive non-cash governmental assistance?

- ☐ No
☒ Yes. Describe.....

Type of assistance

Medicaid

4. Do you expect your family's average monthly net income to increase or decrease by more than 10% during the next 6 months?

- ☒ No
☐ Yes. Explain.

5. Tell the court why you are unable to pay the filing fee in installments within 120 days. If you have some additional circumstances that cause you to not be able to pay your filing fee in installments, explain them.

I am currently unemployed and experiencing a hardship to support my kids and myself.

Debtor 1

Carmen Peshun Smith
First Name Middle Name Last Name

Case number (if known)

Part 2: Tell the Court About Your Monthly Expenses

6. Estimate your average monthly expenses.

Include amounts paid by any government assistance that you reported on line 2.

\$ 4,340.00

If you have already filled out *Schedule J, Your Expenses*, copy line 22 from that form.

7. Do these expenses cover anyone who is not included in your family as reported in line 1?

☒ No
☐ Yes. Identify who.....

8. Does anyone other than you regularly pay any of these expenses?

☒ No
☐ Yes. How much do you regularly receive as contributions? \$_____ monthly

If you have already filled out *Schedule I: Your Income*, copy the total from line 11.

9. Do you expect your average monthly expenses to increase or decrease by more than 10% during the next 6 months?

☒ No
☐ Yes. Explain.....

Part 3: Tell the Court About Your Property

If you have already filled out *Schedule A/B: Property (Official Form 106A/B)* attach copies to this application and go to Part 4.

10. How much cash do you have?

Examples: Money you have in your wallet, in your home, and on hand when you file this application

Cash:

\$ 57.00

11. Bank accounts and other deposits of money?

Examples: Checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, and other similar institutions. If you have more than one account with the same institution, list each. Do not include 401(k) and IRA accounts.

Checking account:

Institution name:

Amount:

57. [Chime]

\$ 57.00

Savings account:

[Chime]

\$ 0.00

Other financial accounts:

N/A

\$

Other financial accounts:

N/A

\$

12. Your home? (if you own it outright or are purchasing it)

Examples: House, condominium, manufactured home, or mobile home

Number Street

Current value: \$

City

State

ZIP Code

Amount you owe on mortgage and liens: \$

13. Other real estate?

Number Street

Current value: \$

City

State

ZIP Code

Amount you owe on mortgage and liens: \$

14. The vehicles you own?

Examples: Cars, vans, trucks, sports utility vehicles, motorcycles, tractors, boats

Make:

Maserati

Model:

Ghibli

Year:

2018

Mileage

102,017

Current value: \$ 21,718

Amount you owe on liens: \$ 51,000.00

Make:

Model:

Year:

Mileage

Current value: \$

Amount you owe on liens: \$

Debtor 1 Carmen Reshun Smith Case number (if known) _____
First Name Middle Name Last Name

15. Other assets?

Describe the other assets:

Current value: \$ _____

Do not include household items and clothing.

Amount you owe on liens: \$ _____

16. Money or property due you?

Who owes you the money or property?

How much is owed?

Do you believe you will likely receive payment in the next 180 days?

Examples: Tax refunds, past due or lump sum alimony, spousal support, child support, maintenance, divorce or property settlements, Social Security benefits, workers' compensation, personal injury recovery

\$ _____

☐ No

\$ _____

☐ Yes. Explain:

Part 4: Answer These Additional Questions

17. Have you paid anyone for services for this case, including filling out this application, the bankruptcy filing package, or the schedules?

☒ No

☐ Yes. Whom did you pay? Check all that apply:

☐ An attorney

☐ A bankruptcy petition preparer, paralegal, or typing service

☐ Someone else _____

How much did you pay?

\$ _____

18. Have you promised to pay or do you expect to pay someone for services for your bankruptcy case?

☒ No

☐ Yes. Whom do you expect to pay? Check all that apply:

☐ An attorney

☐ A bankruptcy petition preparer, paralegal, or typing service

☐ Someone else _____

How much do you expect to pay?

\$ _____

19. Has anyone paid someone on your behalf for services for this case?

☒ No

☐ Yes. Who was paid on your behalf? Check all that apply:

☐ An attorney

☐ A bankruptcy petition preparer, paralegal, or typing service

☐ Someone else _____

Who paid?

Check all that apply:

☐ Parent

☐ Brother or sister

☐ Friend

☐ Pastor or clergy

☐ Someone else _____

How much did someone else pay?

\$ _____

20. Have you filed for bankruptcy within the last 8 years?

☒ No

☐ Yes. District _____ When _____ Case number _____
MM/ DD/ YYYY

District _____ When _____ Case number _____
MM/ DD/ YYYY

District _____ When _____ Case number _____
MM/ DD/ YYYY

Part 5: Sign Below

By signing here under penalty of perjury, I declare that I cannot afford to pay the filing fee either in full or in installments. I also declare that the information I provided in this application is true and correct.

x Carmen Smith x
Signature of Debtor 1

Signature of Debtor 2

Date 05/17/2024
MM / DD / YYYY

Date _____
MM / DD / YYYY